

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CareFirst BlueCross BlueShield Associates' Federal PAC

ADDRESS (number and street) ▼

10455 Mill Run Circle

☐ Check if different than previously reported. (ACC)

Owings Mill

MD

21117

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00286922

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☒ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
10 18 2012

through

M M M / D D D / Y Y Y Y Y Y
11 26 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jeanne Kennedy

Signature of Treasurer

Jeanne Kennedy

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
12 05 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CareFirst BlueCross BlueShield Associates' Federal PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 18 / 2012 To: M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		15784.43
(b) Cash on Hand at Beginning of Reporting Period.....	15737.21	
(c) Total Receipts (from Line 19)	2380.11	19582.89
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18117.32	35367.32
7. Total Disbursements (from Line 31)	7750.00	25000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10367.32	10367.32
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CareFirst BlueCross BlueShield Associates' Federal PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	8		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1159.65	4349.65
(ii) Unitemized	1220.46	15233.23
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2380.11	19582.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2380.11	19582.88
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.01
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2380.11	19582.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2380.11	19582.89

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	7500.00	7500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	250.00	15500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	2000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7750.00	25000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7750.00	25000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2380.11	19582.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2380.11	19582.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 16
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Michael J Felber

Mailing Address 14 Lochmoor Court

City State Zip Code
Timonium MD 21093

FEC ID number of contributing
federal political committee.

C

Name of Employer
CareFirst of Maryland, Inc

Occupation
SVP, SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262109826066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$14.00 Weekly)

Full Name (Last, First, Middle Initial)

B. John A Picciotto

Mailing Address 704 Sussex Road

City State Zip Code
Towson MD 21286

FEC ID number of contributing
federal political committee.

C

Name of Employer
CareFirst of Maryland, Inc

Occupation
EVP & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262110226066

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

Full Name (Last, First, Middle Initial)

C. Rita A Costello

Mailing Address 1911 Corbridge Lane

City State Zip Code
Monkton MD 21111

FEC ID number of contributing
federal political committee.

C

Name of Employer
CareFirst of Maryland, Inc

Occupation
SVP, STRATEGIC MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262117326066

Amount of Each Receipt this Period

36.00

P/R Deduction (\$12.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Aliza Rothenberg

Mailing Address 3413 Deep Willow Avenue

City State Zip Code
Baltimore MD 21208

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

AVP, MARKET PLNG & ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262119126066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

B. Wanda K Oneferu-bey

Mailing Address 1319 Robin Road

City State Zip Code
Pikesville MD 21208

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

AVP, INDIV SALES, TRNG, DVLPMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262121126066

Amount of Each Receipt this Period

96.00

P/R Deduction (\$16.00 Weekly)

Full Name (Last, First, Middle Initial)

c. Meryl D Burgin

Mailing Address 3 Sapphire Hill Ct.

City State Zip Code
Baltimore MD 21209-1563

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

Vice President & DEPUTY GENERAL COUNSI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262151826066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$2.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. William V Stack

Mailing Address 9 Farm Ridge Court

City State Zip Code
Baldwin MD 21013

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

VP, CORPORATE CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262156126066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Weekly)

Full Name (Last, First, Middle Initial)

B. Sandra A Dilworth

Mailing Address 3 Tottenham Court

City State Zip Code
Baltimore MD 21234

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

DIRECTOR, NETWORK & DESKTOP SE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262162726066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$4.00 Weekly)

Full Name (Last, First, Middle Initial)

C. Gregory M Chaney

Mailing Address 16 Fox Creek Court

City State Zip Code
Owings Mills MD 21117

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

EVP, CFO & TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262210226066

Amount of Each Receipt this Period

60.00

P/R Deduction (\$20.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Daniel J Winn

Mailing Address 468 Five Farms Lane

City

Timonium

State

MD

Zip Code

21093

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

AVP & MEDICAL DIRECTOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : PR1262230726066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

B. Wanda H Moore

Mailing Address 5209 Janesdale Court

City

Glendale

State

MD

Zip Code

20769

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

DIRECTOR, CORPORATE TAXATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : PR1262249726066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

C. Kevin C O'neill

Mailing Address 617 W. 40Th Street

City

Baltimore

State

MD

Zip Code

21211

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

VP, PROJECT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : PR1262299526066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

PAGE 10 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Winston Wong

Mailing Address 1998 Conan Doyle Way

City State Zip Code
 Eldersburg MD 21784

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CareFirst of Maryland, Inc

Occupation
 AVP, PHARMACY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262303726066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Weekly)

Full Name (Last, First, Middle Initial)

B. Michael B Edwards

Mailing Address 14236 Bradshaw Drive

City State Zip Code
 Silver Spring MD 20905

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Group Hosp & Med Svcs, Inc

Occupation
 SVP, NETWORKS MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262403026066

Amount of Each Receipt this Period

42.00

P/R Deduction (\$10.00 Weekly)

Full Name (Last, First, Middle Initial)

C. Gwendolyn D Skillern

Mailing Address 9925 Middle Mill Dr.

City State Zip Code
 Owings Mills MD 21117

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CareFirst of Maryland, Inc

Occupation
 SVP, AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1262714626066

Amount of Each Receipt this Period

42.00

P/R Deduction (\$12.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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PAGE 11 OF 16

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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Darlene L Lawrence

Mailing Address 8152 Bell Tower Crossing

City State Zip Code
Pasadena MD 21122

FEC ID number of contributing
federal political committee.

C

Name of Employer

Group Hosp & Med Svcs, Inc

Occupation

AVP, PROF REL&PERF BASED PGMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1263207526066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

B. Zev B Lavon

Mailing Address 4804 Hawksbury Road

City State Zip Code
Baltimore MD 21208

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst of Maryland, Inc

Occupation

ARCHITECT, ENTERPRISE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1263254226066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

C. Maria H. Tildon

Mailing Address 5616 Cross Country Blvd

City State Zip Code
Baltimore MD 21209-4418

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst BlueCross BlueShield

Occupation

SVP, PUBLIC POLICY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1538197926066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Brian Wheeler

Mailing Address 1825 Ingleside Terrace, NW

City

Washington

State

DC

Zip Code

20010-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst BlueCross BlueShield

Occupation

SPEC. ASST TO THE PRES & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.20

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1672113226066

Amount of Each Receipt this Period

25.65

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

B. Tonya Vidal Kinlow

Mailing Address 3952 2nd St., SW

City

Washington

State

DC

Zip Code

20032-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst, Inc.

Occupation

Vice President, Government Affairs, DC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1705271426066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

C. Mr. Chester Burrell

Mailing Address 3023 O Street

City

Washington

State

DC

Zip Code

20007-3108

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst, Inc.

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1727227326066

Amount of Each Receipt this Period

120.00

P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.65

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Steven Margolis

Mailing Address 4812 Attenborough Way

City State Zip Code
 Ellicott City MD 21043-6870

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Senior Vice President, ASU Small - Med

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1734774726066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

B. Michael Avotins

Mailing Address 8 Springhill Farm Court

City State Zip Code
 Cockeysville MD 21030-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Senior Vice President, ASU - LARGE GRO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1932841426066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

C. Mr. Fred Plumb

Mailing Address 8207 Mount Vernon Highway

City State Zip Code
 Alexandria VA 22309-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SVP ASU - FEP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1934102926066

Amount of Each Receipt this Period

120.00

P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Mrs. Deborah Rivkin

Mailing Address 841 Sand Cherry Lane

City State Zip Code
 Laurel MD 20723

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst BlueCross BlueShield

Occupation

VP GOVERNMENT AFFAIRS MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1937212426066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

B. Mr. Kenny Kan

Mailing Address 12823 MacBeth Farm Lane

City State Zip Code
 Clarksville MD 21029-1556

FEC ID number of contributing
federal political committee.

C

Name of Employer

CareFirst BlueCross BlueShield

Occupation

CHIEF ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1947461026066

Amount of Each Receipt this Period

48.00

P/R Deduction (\$0.00)

Full Name (Last, First, Middle Initial)

C. Mr. Harry D Fox

Mailing Address 10421 Logan Drive

City State Zip Code
 Potomac MD 20854-3912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SVP, TECHNICAL & OPS SUPPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

11 / 26 / 2012

Transaction ID : PR1961330626066

Amount of Each Receipt this Period

30.00

P/R Deduction (\$0.00)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.00

1159.65

	21b	X	22		23		24		25		26
	27		28a		28b		28c		29		30b

CareFirst BlueCross BlueShield Associates' Federal PAC

A. BluePAC

Date of Disbursement

Mailing Address 1310 G Street NW

City	State	Zip Code
Washington,	DC	20005

Transaction ID : 48474557

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

7500.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

7500.00

TOTAL This Period (last page this line number only).....

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

CareFirst BlueCross BlueShield Associates' Federal PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Eleanor Holmes Norton

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2012

Mailing Address 2201 Wisconsin Avenue NW Suite 320

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement

011

Transaction ID : 48301947

Amount of Each Disbursement this Period

250.00

Candidate Name

Eleanor Norton

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: DC District: 00

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

--

Amount of Each Disbursement this Period

--

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

--

Amount of Each Disbursement this Period

--

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

250.00

250.00
